

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/03/2014  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>15K116</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>12/17/2013</b>
NAME OF PROVIDER OR SUPPLIER  <b>COMFORCARE HOME HEALTH</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>11555 NORTH MERIDIAN STREET, SUITE 100</b> <b>CARMEL, IN 46032</b>		
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{G 000}	<p>INITIAL COMMENTS</p> <p>This was a revisit for a federal home health initial certification survey which resulted in an extended survey on 10/31/13.</p> <p>Facility provider number: 013284</p> <p>Survey date: December 17, 2013</p> <p>Medicaid vender number: Pending</p> <p>Surveyor: Bridget Boston, RN, Public Health Nurse Surveyor</p> <p>Census: 7 Clinical record review: 3</p> <p>During this survey, it was determined two conditions and seven standard level deficiencies were corrected and three standard level deficiencies were recited.</p> <p>ComForcare continues to be precluded from providing its own home health aide training and competency evaluation program for a period of 2 years beginning November 12, 2013, through November 12, 2015, due to being found out of compliance with the Conditions of Participation 42 CFR 484.36: Home Health Aide services and 484.55: Comprehensive Assessment of Patients.</p> <p>Quality Review: Joyce Elder, MSN, BSN, RN December 20, 2013</p> <p>This survey was modified 1/3/14 as the result of a QA review. je</p>	{G 000}			
{G 211}	484.36(b)(1) COMPETENCY EVALUATION &	{G 211}			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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{G 211}	<p>Continued From page 1 IN-SERVICE TRAI</p> <p>An individual may furnish home health aide services on behalf of an HHA only after that individual has successfully completed a competency evaluation program as described in this paragraph.</p> <p>This STANDARD is not met as evidenced by: Based on personnel file, clinical record, and policy review and interview, the agency failed to ensure home health aides had completed a competency evaluation program that addressed all of the required subject areas prior to providing services in 1 (file E) of 1 home health aide file reviewed, the only home health aide employed, creating the potential to affect the one current patient that received home health aide services.</p> <p>The findings include:</p> <p>1. Personnel file E evidenced the individual had been hired on 8/12/13 to provide home health aide services on behalf of the agency. The file included an incomplete competency evaluation that was dated 8/12/13 and 12/4/13. The same competency document was continued from 8/12/13 and evidenced the following skills were evaluated by the new director of nursing on 12/4/13: 1) Evaluation of range of motion - active and passive of upper and lower extremities, active and passive, 2) Positioning in a bed and chair, 3) A bed bath, 4) Nail care, 5) Shampoo in a bed, 6) Blood pressure, temperature, respirations, and pulse, 7 ) Infection control, 8 ) Reporting patient changes and 9 ) Recognizing emergencies and procedures. The competency evaluation failed to evidence the aide had been</p>	{G 211}			

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{G 211}	Continued From page 2 evaluated for the competent performance of all skills.  2. Clinical record # 5, start of care 11/29/13, included documentation employee E provided services on November 29, 2013, and December 6 and 11, 2013. During these visits the aide assisted with blood pressure monitoring.  3. On 12/17/13 at 12:40 PM, employee A indicated she did not realize the entire competency program had to be completed before the aide independently worked in patient's homes.  4. The policy titled "Quality Management - Nursing Aide / HHA" stated, "All aide services are provided in accordance with the recognized state regulations. ... Aide Training. The aide must pass a HHA [home health aide] competency exam and a registered nurse will complete a competency assessment skills checklist with direct observation of each skill for each aide before assignment begins."	{G 211}			
{G 212}	484.36(b)(1) COMPETENCY EVALUATION & IN-SERVICE TRAI  The HHA is responsible for ensuring that the individuals who furnish home health aide services on its behalf meet the competency evaluation requirements of this section.  This STANDARD is not met as evidenced by: Based on personnel file, clinical record, and policy review and interview, the agency failed to ensure home health aides had met the competency evaluation requirement prior to	{G 212}			

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{G 212}	<p>Continued From page 3</p> <p>providing services in 1 (file E) of 1 home health aide file reviewed, the only home health aide employed, creating the potential to affect the one current patient that received home health aide services.</p> <p>The findings include:</p> <p>1. Personnel file E evidenced the individual had been hired on 8/12/13 to provide home health aide services on behalf of the agency. The file included an incomplete competency evaluation that was dated 8/12/13 and 12/4/13. The same competency document was continued from 8/12/13 and evidenced the following skills were evaluated by the new director of nursing on 12/4/13: 1) Evaluation of range of motion - active and passive of upper and lower extremities, active and passive, 2) Positioning in a bed and chair, 3) A bed bath, 4) Nail care, 5) Shampoo in a bed, 6) Blood pressure, temperature, respirations, and pulse, 7 ) Infection control, 8 ) Reporting patient changes and 9 ) Recognizing emergencies and procedures. The competency evaluation failed to evidence the aide had been evaluated for the competent performance of all skills.</p> <p>2. Clinical record # 5, start of care 11/29/13, included documentation employee E provided services on November 29, 2013, and December 6 and 11, 2013. During these visits the aide assisted with blood pressure monitoring.</p> <p>3. On 12/17/13 at 12:40 PM, employee A indicated she did not realize the entire competency program had to be completed before the aide independently worked in patient's homes.</p>			{G 212}			

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{G 212}	Continued From page 4	{G 212}			
{G 213}	<p>4. The policy titled "Quality Management - Nursing Aide / HHA" stated, "All aide services are provided in accordance with the recognized state regulations. ... Aide Training. The aide must pass a HHA [home health aide] competency exam and a registered nurse will complete a competency assessment skills checklist with direct observation of each skill for each aide before assignment begins."</p> <p>484.36(b)(2)(i) COMPETENCY EVALUATION &amp; IN-SERVICE TRAI</p> <p>The competency evaluation must address each of the subjects listed in paragraphs (a)(1)(ii) through (xiii) of this section.</p> <p>This STANDARD is not met as evidenced by: Based on personnel file, clinical record, and policy review and interview, the agency failed to ensure home health aides had completed a competency evaluation program that addressed all of the required subject areas prior to providing services in 1 (file E) of 1 home health aide file reviewed, the only home health aide employed, creating the potential to affect the one current patient that received home health aide services.</p> <p>The findings include:</p> <p>1. Personnel file E evidenced the individual had been hired on 8/12/13 to provide home health aide services on behalf of the agency. The file included an incomplete competency evaluation that was dated 8/12/13 and 12/4/13. The same competency document was continued from</p>	{G 213}			

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{G 213}	<p>Continued From page 5</p> <p>8/12/13 and evidenced the following skills were evaluated by the new director of nursing on 12/4/13: 1) Evaluation of range of motion - active and passive of upper and lower extremities, active and passive, 2) Positioning in a bed and chair, 3) A bed bath, 4) Nail care, 5) Shampoo in a bed, 6) Blood pressure, temperature, respirations, and pulse, 7 ) Infection control, 8 ) Reporting patient changes and 9 ) Recognizing emergencies and procedures. The competency evaluation failed to evidence the aide had been evaluated for the competent performance of all skills.</p> <p>2. Clinical record # 5, start of care 11/29/13, included documentation employee E provided services on November 29, 2013, and December 6 and 11, 2013. During these visits the aide assisted with blood pressure monitoring.</p> <p>3. On 12/17/13 at 12:40 PM, employee A indicated she did not realize the entire competency program had to be completed before the aide independently worked in patient's homes.</p> <p>4. The policy titled "Quality Management - Nursing Aide / HHA" stated, "All aide services are provided in accordance with the recognized state regulations. ... Aide Training. The aide must pass a HHA [home health aide] competency exam and a registered nurse will complete a competency assessment skills checklist with direct observation of each skill for each aide before assignment begins."</p>	{G 213}			